



**Carole Jean Jordan, C.F.C.**

TAX COLLECTOR FOR INDIAN RIVER COUNTY

# Dealer Transaction Worksheet

Rev. 12/13/23

## DEALER & CONTACT INFORMATION

Dealership Name: \_\_\_\_\_

PIN Number: \_\_\_\_\_ Date: \_\_\_\_\_

Customer Name(s): \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Payment by: Check # \_\_\_\_\_ **OR** Pre-Paid Advance Deposit Account

## TITLE INFORMATION (IF LEFT BLANK, TITLE WILL REMAIN ELECTRONIC)

Title Only? YES NO \*Cannot apply for "title only" if the customer received a temporary registration or temporary transfer of current plate

Title Status: FAST TITLE MAIL TITLE ELECTRONIC TITLE

Lienholder Name (if any): \_\_\_\_\_

## PLATE & REGISTRATION INFORMATION \*\* (VALID INSURANCE MUST BE PROVIDED FOR APPLICABLE MOTOR VEHICLE TRANSACTIONS)

REGISTRATION PERIOD: DO NOT EXTEND 1-12 MONTHS 13-24 MONTHS

### TRANSFER PLATE

PLATE NUMBER: \_\_\_\_\_

REPLACE PLATE? YES NO

SUNSHINE STATE

INDIAN RIVER

IN GOD WE TRUST

OTHER: \_\_\_\_\_

### NEW PLATE (ORIGINAL)

#### PLATE TYPE

SUNSHINE STATE

INDIAN RIVER

IN GOD WE TRUST

OTHER: \_\_\_\_\_

**INTERNAL USE ONLY BELOW THIS LINE**



CLERK INITIALS

DATE:

COMPLETED

REJECTED

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_